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Washington Mutual

We know that your privacy is important to you. It is to Washington Mutual too. That's why we take care regarding your personal information.

At times, we do share customer information (such as: name and address) to allow marketing. We share with our Washington Mutual family of affiliates and third party business associates (companies and divisions that provide mortgage, insurance and investment products and services) whom we trust.

If you've told us not to share your personal information, we won't. This won't change until you tell us otherwise.

You can find out your privacy choices at any time. Just call us toll free at 800-533-3534. Then, just follow the prompts. You can also call us toll free at 800-533-3534 to change your privacy choices.

We hope you will continue to receive information about the products and services that our affiliates and third parties have to offer. If you wish to do so, then you do not need to respond to this notice.

If your account has a California address, we will send you a notice each year. It will tell you about your privacy rights under state law. We will also send you an additional notice each year that tells you about your privacy rights under federal law.

The California Privacy Notice follows.

IMPORTANT PRIVACY CHOICES FOR CONSUMERS

You have the right to control whether we share some of your personal information. Please read the following information carefully before you make your choices below.

This privacy notice applies to the following Washington Mutual companies and divisions: Long Beach Mortgage Company; Washington Mutual Bank; Washington Mutual Bank fsb; WMBFA Insurance Agency, Inc.; Washington Mutual Finance Group, LLC; Washington Mutual Finance of Mississippi, LLC; WMFS Insurance Services, Inc.; WM Financial Services, Inc.; WM Insurance Agency, Inc.; Washington Mutual Insurance Services, Inc.; Western Bank; Home Crest Insurance Services, Inc.; Norstar Mortgage Corp; WM Specialty Mortgage LLC; California Reconveyance Company; Washington Reconveyance Company.

YOUR RIGHTS

You have the following rights to restrict the sharing of personal and financial information with our affiliates (companies we own or control) and outside companies that we do business with. Nothing in this form prohibits the sharing of information necessary for us to follow the law, as permitted by law, or to give you the best service on your accounts with us. This includes sending you information about some other products or services.

TIME SENSITIVE REPLY

You may make your privacy choice(s) at any time. Your choice(s) marked here will remain unless you state otherwise. However, if we do not hear from you we may share some of your information with affiliated companies and other companies with whom we have contracts to provide products and services.

To exercise your choices, do **one** of the following:

For immediate service of your privacy choices call toll free: 1-800-533-3534

If you have notified us before, your instructions are already in place. Call toll free 1-800-533-3534 if you wish to confirm your previous choices

You may also fax the completed form to 1-866-442-9964 (toll free fax) or fill out, sign and send back this form to us in the attached envelope. Detach at the dotted lines and fold in half. Place a stamp on the outside where indicated and mail. (You may want to make a copy for your records).

YOUR CHOICES: Call toll free 1-800-533-3534

Restrict Information Sharing With Companies We Own or Control (Affiliates): Unless you say "No," we may share personal and financial information about you with our affiliated companies.

☐ NO, please do not share personal and financial information with your affiliated companies.

Restrict Information Sharing With Other Companies We Do Business With To Provide Financial Products And Services: Unless you say "No," we may share personal and financial information about you with outside companies we contract with to provide financial products and services to you.

☐ NO, please do not share personal and financial information with outside companies you contract with to provide financial products and services.

Name:

First, MI, Last

Phone Number:

Street Address:

City: State: Zip:

Mailing Address (if different than street address):

City: State: Zip:

Signature: Date:

ACCOUNT NUMBER